

(17-19)

PERMIT NUMBER

DISCHARGE NUMBER

MONITORING PERIOD

FROM

TO

(20-21)	(22-23)	(24-25)
---------	---------	---------

(26-27)	(28-29)	(30-31)
---------	---------	---------

NOTE: Read instructions before completing this form.

OMB No. 2040-0004
Expires 3-31-88

MAY 15 1939

1993
WATER PERMITS & COMPLIANCE GRANTS
EPA ASSISTANCE GRANTS
Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
1. TOTAL FREIGHT GROSS VALUE	SAMPLE MEASUREMENT								0	yearly	GRAB
	PERMIT REQUIREMENT				MINIMUM		MAXIMUM				
2. TOTAL FREIGHT GROSS VALUE	SAMPLE MEASUREMENT								0	yearly	GRAB
	PERMIT REQUIREMENT					5	10				
3. TOTAL FREIGHT GROSS VALUE	SAMPLE MEASUREMENT						< 0.0005		0	yearly	GRAB
	PERMIT REQUIREMENT						DAILY MAX			yearly	GRAB
4. TOTAL FREIGHT GROSS VALUE	SAMPLE MEASUREMENT						< 1.005		0	yearly	GRAB
	PERMIT REQUIREMENT						DAILY MAX			yearly	GRAB
5. TOTAL FREIGHT GROSS VALUE	SAMPLE MEASUREMENT						< 0.01		0	yearly	GRAB
	PERMIT REQUIREMENT						DAILY MAX			yearly	GRAB
6. TOTAL FREIGHT GROSS VALUE	SAMPLE MEASUREMENT						< 2.05		0	yearly	GRAB
	PERMIT REQUIREMENT						DAILY MAX			yearly	GRAB
7. TOTAL FREIGHT GROSS VALUE	SAMPLE MEASUREMENT						0.053		0	yearly	GRAB
	PERMIT REQUIREMENT						DAILY MAX			yearly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
P.H. FITCH			102	138-0000	89	05	10
V.P. / G.A.							
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

Facility Name/Location (if different)
NAME CYPRUS THOMPSON CEMENT CO. INC.
ADDRESS P.O. BOX 82
CLAYTON, MISSISSIPPI 39201

DISCHARGE MONITORING REPORT (DMR)
(2-16) (17-19)

PERMIT NUMBER	DISCHARGE NUMBER
---------------	------------------

OMB No. 2040-0004
Expires 3-31-88

MAY 15 1989

FACILITY
LOCATION
ATTN: P.H. FITCH VICE PRESIDENT

MONITORING PERIOD								
FROM			TO					
YEAR	MO	DAY	YEAR	MO	DAY			
87	24	01	87	4	31			
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)			

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			No. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH 10400 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	*****		6.6		7.5		0	WEEKLY GRAB
	PERMIT REQUIREMENT	*****	*****		6.0	*****	9.0		0	WEEKLY GRAB
SOLIDS, TOTAL SUSPENDED 10530 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	*****			15	24		0	WEEKLY GRAB
	PERMIT REQUIREMENT	*****	*****		*****	300A AVG	DAILY MX		0	WEEKLY GRAB
ARSENIC, TOTAL (AS AS) 1002 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	*****				0.005		0	ONCE/MONTH GRAB
	PERMIT REQUIREMENT	*****	*****		*****	*****	0.0490		0	ONCE/MONTH GRAB
ADMIUM, TOTAL (AS CU) 1027 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	*****				0.009		0	ONCE/MONTH GRAB
	PERMIT REQUIREMENT	*****	*****		*****	*****	0.0053		0	ONCE/MONTH GRAB
UPPER, TOTAL (AS CU) 1042 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	*****				0.01		0	ONCE/MONTH GRAB
	PERMIT REQUIREMENT	*****	*****		*****	*****	0.0245		0	ONCE/MONTH GRAB
AD, TOTAL (AS PB) 1051 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	*****				44.0		1	ONCE/MONTH GRAB
	PERMIT REQUIREMENT	*****	*****		*****	*****	0.0589		0	ONCE/MONTH GRAB
ZINC, TOTAL (AS ZN) 11092 1 0 0 EFFLUENT GROSS VALU	SAMPLE MEASUREMENT	*****	*****				0.083		0	ONCE/MONTH GRAB
	PERMIT REQUIREMENT	*****	*****		*****	*****	0.185		0	ONCE/MONTH GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

P.H. FITCH

V.P. / C.M.

TYPED OR PRINTED

AREA
CODE

NUMBER

YEAR

MO

DAY

Facility Name/Location (if different)
NAME CYPRUS THOMPSON
ADDRESS P.O. BOX 52
CLAYTON
FACILITY
LOCATION

DISCHARGE MONITORING REPORT (DMR)
(2-16)

SYSTEM (NPDES)
(17-19)

OMB No. 2040-0004
Expires 3-31-88

PERMIT NUMBER	DISCHARGE NUMBER
---------------	------------------

MONITORING PERIOD						
FROM			TO			
YEAR	MO	DAY	YEAR	MO	DAY	
(20-21)	(22-23)	(24-25)	(26-27)	(28-29)	(30-31)	

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
LOW, IN CONDUIT OR THRU TREATMENT PLANT 0050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	1.16	2.376		*****	*****	*****		0		
	PERMIT REQUIREMENT	REPORT	REPORT		*****	*****	*****			DAILY	
		30DA AVG	DAILY MX								
MERCURY, TOTAL (AS HS) 1900 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	*****	0.0169		1		GRAB
	PERMIT REQUIREMENT	*****	*****		*****	*****	0.0002			ONCE/ MONTH	GRAB
							DAILY MX				
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

RECEIVED
MAY 15 1989
WATER PERMIT & COMPLIANCE SECTION
EPA REGION 10

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
P.H. FITCH V.P./ GMM. TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)